

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021312

Entity Name: B & L DEVELOPMENT, L.L.C.

FILED  
Jan 07, 2007  
Secretary of State

**Current Principal Place of Business:**

1102 COLONNADES DRIVE  
FORT PIERCE, FL 34949

**New Principal Place of Business:**

**Current Mailing Address:**

1102 COLONNADES DRIVE  
FORT PIERCE, FL 34949

**New Mailing Address:**

FEI Number: 87-0699720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VOCELLE, LOUIS B JR  
3333 20TH STREET  
VERO BEACH, FL 32960 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CHI CHIOU LIU, M.D.,  
Address: 1102 COLONNADES DRIVE  
City-St-Zip: FORT PIERCE, FL 34949

Title: MGRM ( ) Delete  
Name: OSWALDO D. BENITEZ,, M.D.  
Address: 408 S. 25TH STREET  
City-St-Zip: FORT PIERCE, FL 34947

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHI CHIOU LIU, M.D.

MGRM

01/07/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date